



# City of Carlsbad

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1635 FARADAY AVENUE  
CARLSBAD CA 92008

TELEPHONE  
(760) 602-2430

## FINANCE DEPARTMENT

### CLAIM FOR EXEMPTION FROM TRANSIENT OCCUPANCY TAX (NON-TRANSIENT STATUS)

I declare under penalty of perjury that to the best of my knowledge and belief this statement is true, correct and complete, made in good faith, in compliance with provisions of the Carlsbad City Code: I will be staying at \_\_\_\_\_ for a period of 31 consecutive nights or longer. If I do not stay at this hotel for a period of 31 consecutive nights or longer, I agree to pay transient occupancy tax for each night of occupancy in the hotel. I also understand that any transient occupancy tax paid previous to this agreement will not be refunded to me by either the hotel or the City of Carlsbad.

Further information, references, facts and reasons to confirm exemption:

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Signed \_\_\_\_\_ Date \_\_\_\_\_